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**BEFORE THE BOARD OF PATENT APPEALS  
AND INTERFERENCES**

Paper No. 16

Application Number: 09/470,344

**MAILED**

Filing Date: December 22, 1999

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Appellant(s): KERPELMAN ET AL.

**GROUP 3600**

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Patrick S. Yoder  
For Appellant

**EXAMINER'S ANSWER**

This is in response to the appeal brief filed May 8, 2003.

**(1) Real Party in Interest**

A statement identifying the real party in interest is contained in the brief.

**(2) *Related Appeals and Interferences***

A statement identifying the related appeals and interferences which will directly affect or be directly affected by or have a bearing on the decision in the pending appeal is contained in the brief.

**(3) *Status of Claims***

The statement of the status of the claims contained in the brief is correct.

**(4) *Status of Amendments After Final***

The appellant's statement of the status of amendments after final rejection contained in the brief is correct.

**(5) *Summary of Invention***

The summary of invention contained in the brief is correct.

**(6) *Issues***

The appellant's statement of the issues in the brief is correct.

**(7) *Grouping of Claims***

The appellant's statement in the brief that certain claims do not stand or fall together is not agreed with because it appears from the claims and appellant's arguments that the claims are not patentably distinct from one another and will not stand or fall independently of one another. Furthermore, Appellant has failed to provide an explanation as to why claims 1, 17 and 32 and their respective dependent claims are separately patentably from claims 46 and 55 and their respective dependent claims. Therefore, based upon Appellant's arguments, the claim grouping appear to be in the following fashion: claim 1 and its respective dependent claims stand or fall

together and claims 17 and 46 their respective dependent claims stand or fall together and claims 32 and 55 their respective dependent claims stand or fall together. See MPEP 1206.

**(8) *ClaimsAppealed***

The copy of the appealed claims contained in the Appendix to the brief is correct.

**(9) *Prior Art of Record***

6,260,021 Wong et al. 7-2001

**(10) *Grounds of Rejection***

The following ground(s) of rejection are applicable to the appealed claims:

***Claim Rejections - 35 USC § 103***

The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

Claims 1-60 are rejected under 35 U.S.C. 103(a) as being unpatentable over U. S. Patent No. 6,260,021 to Wong et al.

As per claim 1, Wong et al. teaches a medical facility data communications system, the system comprising:

--the claimed internal data communications network is met by the use of the Intranet (36, Fig. 1) (see: column 8, lines 53-61);  
--the claimed plurality of clients coupled to the internal network and uniquely addressed on the internal network is met by the use of client system such as computer workstations (36,

Fig. 1) connected via the Intranet (36, Fig. 1) and this suggests while using the Intranet that all addresses are unique (see: column 8, lines 53-64).

Wong et al. teaches a medical image distributing system that uses a medical image server (12, Fig. 1) and a plurality of network-attached client workstations for receiving and transferring medical images and this suggests while using the network (Intranet) that all addresses are unique (see: column 3, lines 61 to column 4, lines 15).

Wong et al. fails to explicitly teach the claimed data communications control system coupled to the internal network for receiving client data from the clients, transmitting client data to a remote service provider, receiving addressed data from the remote service provider, and distributing the addressed data to the clients.

It is well known in the computer medical industry that the Internet with a data communication control system, including Domain Name Systems and Domain Name Systems servers, both have domain name addresses and IP addresses that receives and transfers information as requested by the user through a remote service provider. Therefore, it would have been obvious to a person having ordinary skill in the art at the time of the invention to include a data communication control system using a remote service provider within the medical image distribution system as taught by Wong et al. with the motivation of assisting the users in uniquely identifying specific addressing information, thereby providing a simpler and quicker way to access desired data over a network.

As per claims 2-3, Wong et al. teaches the use of internal network such as the Intranet (LAN) (36, Fig. 1) (see: column 8, lines 53-61).

As per claim 4, Wong et al. teaches the claimed clients include at least one medical imaging system configured to produce image data (see: column 3, lines 31-35).

As per claim 5, Wong et al. teaches the claimed at least one imaging system is selected from a group including medical resonance imaging system, computed tomography systems, ultrasound systems, and x-ray systems (see: column 1, lines 21-27).

As per claims 6-8, Wong et al. teaches the claimed clients include a hospital information system, radiology department and picture archiving and communication system (see: column 1, lines 21-27, 52-59 and 65 to column 2, lines 14 and Fig. 1).

As per claims 9-10, Wong et al. teaches image distribution system configured to access from network clients in accordance with predetermined data acquisition request and the data accessed includes operational parameters of the clients (see: column 2, lines 38-51).

As per claims 1 I-12, Wong et al. teaches a medical image distributing system that uses a medical image server (12, Fig. 1) and a plurality of network-attached client workstations for receiving and transferring medical images (see: column 3, lines 61 to column 4, lines 15 and Fig. 1).

Wong et al fails to teach the use of the at least one mobile client connected to the internal network to access data.

It is well known in computer medical industry that using a portable computer allows a user access to the Internet. Therefore, it would have been obvious to one having ordinary skill in the art at the time invention was made to either use a portable computer or a hard wired computer within the medical image distribution of system as taught by Wong et al. with the motivation of allowing the user unlimited opportunities to access and retrieve information on the Internet,

thereby facilitating the approach of gathering information through over a network in a less time consuming and efficient manner.

As per claim 13, Wong et al. teaches the claimed data communications control system includes an operator interface, and wherein the system is configured to access data from networked clients in response to an operator request input via the operator interface (see: column 3, lines 61 to column 4, lines 14).

As per claim 14, Wong et al. teaches the claimed external network interface for exchanging client data and addressed data between the data communications control system and the remote service provider (see: column 3, lines 61 to column 4, lines 15 and column 8, lines 53-64).

As per claim 15, Wong et al. teaches the claimed external network interface includes an interface for at least two different data communications media (see: column 3, lines 61 to column 4, lines 15).

As per claim 16, Wong et al. teaches communication between the medical image server (12, Fig. 1) and a plurality of network-attached client workstations for receiving and transferring medical images (see: column 3, lines 61 to column 4, lines 15).

Wong et al. fails to teach the claimed data communications between selected clients and the remote service provider are routed through the data communications control system.

It is well known in the computer medical industry that communication between a client computer and a remote service provider using a data communication control system is essential to receive and transfer information requested by the user. Therefore, it would have obvious to a person having ordinary skill in the art at the time of the invention to include a data

communication control system using a remote service provider within the medical image distribution of system as taught by Wong et al. with the motivation of assisting the users in accessing and retrieving information on the Internet, thereby facilitating the approach of gathering information through over a network in a more effective and effective manner.

As per claim 17, Wong et al. teaches a data communications system for a medical diagnostic facility, the system comprising:

--the claimed plurality of clients linked to an internal network, the clients including a medical diagnostic imaging system is met by the use of client system such as computer workstations (36, Fig. 1) connected to the medical server (12, Fig. 1) via the Intranet (36, Fig. 1) (see: column 8, lines 53-64);

Wong et al. fails to teach:

--the claimed data communications control system linked to the internal network for receiving client data from the clients, distributing addressed data to the clients, transmitting client data to a remote service provider and receiving addressed data from the remote service provider; and

--the claimed external network interface coupled to the data communications control system for transmitting the client data to the remote service provider and for receiving the addressed data from the remote service provider.

It is well known in the computer medical industry that the Internet with a data communication control system, including Domain Name Systems and Domain Name Systems servers, both have domain name addresses and IP addresses that receives and transfers information as requested by the user through a remote service provider. Therefore, it would have

obvious to a person having ordinary skill in the art at the time of the invention to include a data communication control system using a remote service provider within the medical image distribution of system as taught by Wong et al. with the motivation of assisting the users in uniquely identifying specific addressing information, thereby providing a simpler and quicker way to access desired data over a network.

As per claim 18, Wong et al. teaches the claimed client data includes operational data for evaluating performance of the medical diagnostic imaging system (see: column 3, lines 31-36).

As per claims 19-21, Wong et al. teaches the claimed internal network is a local area network such as the Ethernet and the external network is a wide area network that includes the Internet. The Internet (WAN) (36, Fig. 1) and Intranet (LAN) (36, Fig. 1) meet this limitation.

As per claims 22-24, Wong et al. teaches the claimed clients include a hospital information system, radiology department and picture archiving and communication system (see: column 1, lines 21-27, 52-59 and 65 to column 2, lines 14 and Fig. 1).

As per claims 25-26, Wong et al. teaches a image distribution system configured to access data from networked clients in accordance with a predetermined data acquisition routine and the data accessed includes operational parameters of the clients (see: column 2, lines 38-51).

As per claim 27-28, Wong et al. teaches a medical image distributing system that uses a medical image server (12, Fig. 1) and a plurality of network-attached client workstations for receiving and transferring medical images (see: column 3, lines 61 to column 4, lines 15 and Fig. 1).

Wong et al. fails to teach the use of the at least one mobile client connected to the internal network to access data.

It is well known in computer medical industry that using a portable computer allows access the Internet. Therefore, it would have been obvious to one having ordinary skill in the art at the time invention was made to either use a portable computer or a hard wired computer within the medical image distribution of system as taught by Wong et al. with the motivation of assisting the users with accessing and retrieving information on the Internet, thereby facilitating the approach of gathering information through over a network in a less time consuming and efficient manner.

As per claim 29, Wong et al. teaches the claimed data communications control system includes an operator interface, and wherein the system is configured to access data from networked clients in response to an operator request input via the operator interface (see: column 3, lines 61 to column 4, lines 14).

As per claims 30-31, Wong et al. teaches the claimed data communications control system is configured to store and execute communications interface routines interactively with the clients and the communications interface routines include a web browser routine (see: column 3, lines 42-52 and column 3, lines 61 to column 4, lines 15).

As per claim 32, Wong et al. teaches a communications system for a medical diagnostic facility, the system comprising:

- the claimed internal network is met by Intranet (36, Fig. 1);
- the claimed plurality of clients configured for connection to the network for transmission of client data. This feature is met by the medical image distributing system that uses a medical image server (12, Fig. 1) and a plurality of network-attached client workstations for receiving and transferring medical images (see: column 3, lines 61 to column 4, lines 15).

Wong et al. fails to explicitly teach the clients including a physically mobile client as well as the data communications control system being configured to automatically access client data including data indicative of a location of the mobile client and data communication control system coupled to the internal network and to an external network for communicating client data and addressed data between the clients and a remote service provider.

Since, Wong et al. teaches the use of the Intranet and Internet (36, Fig. 1) to access and communication data using hard wired computer (38, Fig. 1). It would have been obvious to a person having ordinary skill in the art to include the use of a portable computer and the location of portable computer as well as the IP address request by the users from the service provider over the network within the medical image distribution of system as taught by Wong et al. with the motivation of assisting the users with accessing and retrieving information on the Internet, thereby facilitating the approach of gathering information through over a network in a less time consuming and efficient manner.

As per claim 33, Wong et al. teaches a medical image distributing system that uses a medical image server (12, Fig. 1) and a plurality of network-attached client workstations for receiving and transferring medical images (see: column 3, lines 61 to column 4, lines 15 and Fig. 1).

Wong et al. fails to teach the claimed control system is configured to detect the location of the mobile client upon connection of the mobile client to the network.

It is well known in the computer medical industry that the Internet with a data communication control system, including Domain Name Systems and Domain Name Systems servers, both have domain name addresses and IP addresses that receives and transfers

information as requested by the user through a remote service provider. Therefore, it would have obvious to a person having ordinary skill in the art at the time of the invention to include a data communication control system using a remote service provider within the medical image distribution of system as taught by Wong et al. with the motivation of assisting the users in uniquely identifying specific addressing information, thereby providing a simpler and quicker way to access desired data over a network.

As per claim 34, Wong et al. teaches clients include a medical diagnostic imaging system, and wherein the client data includes operational data for evaluating performance of the medical diagnostic imaging system (see: column 3, lines 31-36).

As per claims 35-37, Wong et al. teaches the claimed internal network is a local area network such as the Ethernet and the external network is a wide area network that includes the Internet. The Internet (WAN) (36, Fig. 1) and Intranet (LAN) (36, Fig. 1) meet this limitation.

As per claims 38-40, Wong et al. teaches the claimed clients include a hospital information system, radiology department and picture archiving and communication system (see: column 1, lines 21-27, 52-59 and 65 to column 2, lines 14 and Fig. 1).

As per claims 41-42, Wong et al. teaches a image distribution system configured to access data from networked clients in accordance with a predetermined data acquisition routine and the data accessed includes operational parameters of the clients (see: column 2, lines 38-51).

As per claim 43, Wong et al. teaches the claimed data communications control system includes an operator interface, and wherein the system is configured to access data from networked clients in response to an operator request input via the operator interface (see: column 3, lines 61 to column 4, lines 14).

As per claims 44-45, Wong et al. teaches the claimed data communications control system is configured to store and execute communications interface routines interactively with the clients and the communications interface routines include a web browser routine (see: column 3, lines 42-52 and column 3, lines 61 to column 4, lines 15).

As per claim 46, Wong et al. teaches the transmitting and processing of medical reports requested with medical image data from a network-attached (Intranet or Internet) to client workstations (see: column 3, lines 61 to column 4, lines 29 and column 3, lines 31-36).

Wong et al. fails to teach the claimed processing and transmitting at least a portion of the client data from the data communications control system to a remote service provider via an external network.

It is well known in the computer medical industry that the Internet with a data communication control system, including Domain Name Systems and Domain Name Systems servers, both have domain name addresses and IP addresses that receives and transfers information as requested by the user through a remote service provider. Therefore, it would have obvious to a person having ordinary skill in the art at the time of the invention to include a data communication control system using a remote service provider within the medical image distribution of system as taught by Wong et al. with the motivation of assisting the users in uniquely identifying specific addressing information, thereby providing a simpler and quicker way to access desired data over a network.

As per claim 47, Wong et al. teaches a medical image distributing system that uses a medical image server (12, Fig. 1) and a plurality of network-attached client workstations for receiving and transferring medical images (see: column 3, lines 61 to column 4, lines 15).

Wong et al. fails to teach the claimed steps of receiving addressed data from the remote service provider via the data communications control system, and distributing the addressed data to an intended client via the internal network.

The obviousness of incorporating such a feature within the system of Wong et al. is as discussed in claim rejection of claim 47, and incorporated herein.

As per claim 48, Wong et al. teaches the transmitting and processing of medical reports requested with medical image data from a network-attached (Internet or Internet) to client workstations (see: column 3, lines 61 to column 4, lines 29 and column 3, lines 31-36).

Wong fails to explicitly teach the claimed client data is transmitted to the data communications control system in response to a request from the control system.

It is well known in the computer medical industry that communication between a client computers and a remote service provider using a data communication control system is essential to receive and transfer information requested by the user. Therefore, it would have obvious to a person having ordinary skill in the art at the time of the invention to include a data communication control system using a remote service provider within the medical image distribution of system as taught by Wong et al. with the motivation of assisting the users in accessing and retrieving information on the Internet, thereby facilitating the approach of gathering information through over a network in a more effective and effective manner.

As per claim 49, Wong et al. teaches the claimed control system includes an operator interface, and wherein the request is generated via the operator interface (see: column 3, lines 61 to column 4, lines 15).

As per claim 50, Wong et al. teaches the claimed client data is transmitted to the control system in a transmission created by operator intervention at the client (see: column 3, lines 61 to column 4, lines 15).

As per claims 51-53, Wong et al. teaches the claimed transmission is created via an interface routine executed interactively by the control system and client, interface routine includes a web browser application and the step of storing client data for access by the control system (see: column 3, lines 42-52 and column 3, lines 61 to column 4, lines 15).

As per claim 54, Wong et al. teaches the claimed the step of logging communications between the clients and the control system (see: column 10, lines 28-47).

As per claim 55, Wong et al. teaches a medical image distributing system that uses a medical image server (12, Fig. 1) and a plurality of network-attached client workstations for receiving, transferring and storing medical image data (see: column 3, lines 61 to column 4, lines 15).

Wong et al. fails teach the claimed the clients including at least one physically mobile client and transmitting client data from the clients to a data communications control system, the client data including at least data indicative of a location of the at least one mobile client.

Since, Wong et al. teaches the use of the Intranet and Internet (36, Fig. 1) to access and communication data using hard wired computer (38, Fig. 1). It would have been obvious to a person having ordinary skill in the art to include the use of a portable computer and the location of portable computer as well as the address of the users within the medical image distribution of system as taught by Wong et al. with the motivation of assisting the users with accessing and

retrieving information on the Internet, thereby facilitating the approach of gathering information through over a network in a less time consuming and efficient manner.

As per claims 56-57, Wong et al. teaches a medical image distributing system that uses a medical image server (12, Fig. 1) and a plurality of network-attached client workstations for receiving and transferring medical images (see: column 3, lines 61 to column 4, lines 15 and Fig. 1).

Wong et al. fails to teach at least one mobile client is transmitted upon connection of the at least one mobile client to the network and the step of accessing client data representative of performance of the clients.

It is well known in computer medical industry that a portable computer can access, transmit and receive information while logged on the Internet. Therefore, it would have been obvious to one having ordinary skill in the art at the time invention was made to use a portable computer to receive and transmit information over a network within the medical image distribution system as taught by Wong et al. with the motivation of assisting the users with accessing and retrieving information on the Internet, thereby facilitating the approach of gathering information through over a network in a less time consuming and efficient manner.

As per claim 58, this feature has addressed in the rejection of claim 29, and is incorporated herein.

As per claim 59, Wong teaches the claimed step of transmitting at least a portion of the client data to a remote service provider via an external network. This feature is met by the medical image distributing system that uses a medical image server (12, Fig. 1) and a plurality of

network-attached (Internet/Internet) client workstations for receiving and transferring medical images (see: column 3, lines 61 to column 4, lines 15 and Fig. 1).

As per claim 60, Wong et al. teaches a medical image distributing system that uses a medical image server (12, Fig. 1) and a plurality of network-attached client workstations for receiving, transferring and storing medical image data (see: column 3, lines 61 to column 4, lines 15).

Wong et al. fails to teach the claimed steps of receiving addressed data at the control system via an external network, and distributing the addressed data to an intended client.

It is well known in the computer medical industry that the Internet with a data communication control system, including Domain Name Systems and Domain Name Systems servers, both have domain name addresses and IP addresses that receives and transfers information as requested by the user through a remote service provider. Therefore, it would have been obvious to a person having ordinary skill in the art at the time of the invention to include a data communication control system using a remote service provider within the medical image distribution of system as taught by Wong et al. with the motivation of assisting the users in uniquely identifying specific addressing information, thereby providing a simpler and quicker way to access desired data over a network.

#### ***(11) Response to Argument***

In the Appeal Brief filed 8 May 2003, Appellant makes the following arguments:

(A) (i) Wong fails to teach the “data communications control system coupled to the internal network for receiving client data from the clients, transmitting client data to a remote

service provider, receiving addressed data from the remote service provider, and distributing the addressed data to the clients” in claim 1.

(ii) The “well known in the art” reference do not provide the missing recited features.

(iii) The proposed combination is not supported by and is inconsistent with the reference.

(B) (i) Wong fails to teach an “external network interface coupled to the data communications control system for transmitting the client data to the remote service provider and for receiving the addressed data from the remote service provider” in claim 17.

(ii) The “well known in the art” reference do not provide the missing recited features.

(iii) The references do not teach recitation of “the clients including a medical diagnostic imaging system”.

(iv) The proposed combination is not supported by and is inconsistent with the reference.

(C) (i) Wong fails to teach the “clients including a physically mobile client as well as the data communications control system being configured to automatically access client data including data indicative of a location of the mobile client and data communication control system coupled to the internal network and to an external network for communicating client data and addressed data between the clients and a remote service provider” in claim 32.

(ii) The “well known in the art” reference do not provide the missing recited features.

(iii) The references fail to teach “data indication of a location of the mobile client”.

(iv) The proposed combination is not supported by and is inconsistent with the reference.

(D) (i) Wong fails to teach “processing and transmitting at least a portion of the client data from the data communications control system to a remote service provider via an external network” in claim 46.

(ii) The “well known in the art” reference do not provide the missing recited features.

(iii) The proposed combination is not supported by and is inconsistent with the references.

(E) (i) Wong fails to teach the “clients including at least one physically mobile client and transmitting client data from the clients to a data communications control system, the client data including at least data indicative of a location of the at least one mobile client” in claim 55.

(ii) The “well known in the art” reference do not provide the missing recited features.

(iii) The references fail to teach “data indication of a location of the mobile client”.

[Examiner’s “well known in the art” reference regarding the Microsoft Computer Dictionary, a router, or an Internet service provider, fails to teaches a “data communication control system” and a “remote service provider”.

(B) The reference of Wong et al. in combination with what is “well known in the art” fails to teach “clients including a medical diagnostic imaging system” and/or the combination is improper because the proposed combination is not supported by and is inconsistent with the references.

(C) The reference of Wong et al. in combination with what is “well known in the art” fails to teach “data indicative of a location of the mobile client” and the combination is improper because the proposed combination is not supported by and is inconsistent with the references.]

Examiner will address Appellant’s arguments in sequence as they appear in the brief.

Response to Arguments (A) and (B):

In response to the first and second arguments, the Examiner respectfully submits that Wong et al. teaches a medical image distributing system that uses a medical image server (12, Fig. 1) and a plurality of network-attached client workstations for receiving and transferring medical images using links (36, Fig. 1) implemented with the TCP/IP suite of protocols that could be campus intranet (internal network), a wide-area intranet or even the Internet (external network) (see: column 3, lines 61 to column 4, lines 15). Moreover, the Examiner never stated that in the four corners of the Wong reference that the medical image server was not used to receive, transmit and distributes client data and address data to the client. Furthermore, Wong's medical image server functions as a data communication control system because it provides uniform and rapid distribution between client workstation (see: column 7, lines 10-14) and the operation of the Internet includes dialing up an Internet service provider (remote service provider) via modem to connect a network using the same communication protocols to pass information to and from each other. Likewise, the definitions of a Domain Name System (DNS), Domain Name System (DNS) server and remote access service are conventional technological standards that the skilled artisan using the Internet would recognize and the medical image server utilizes all these components to process requests in order to transmit medical images.

In addition, the Examiner respectfully notes that the cited reference was never applied as a reference under 35 U.S.C. 102 against the pending claims. As such, the Examiner respectfully submits that the issue at hand is not whether the applied prior art specifically teaches the claimed features, *per se*, but rather, whether or not the prior art, when taken in combination with the knowledge of average skill in the art, would put the artisan in possession of these features.

Regarding this issue, it is well established that references are evaluated by what they suggest to one versed in the art, rather than by their specific disclosures, *In re Bozek*, 163 USPQ 545 (CCPA 1969). The issue of obviousness is not determined by what the references expressly state but by what they would reasonably suggest to one of ordinary skill in the art, as supported by decisions in *In re DeLisle* 406 Fed 1326, 160 USPQ 806; *In re Kell, Terry and Davies* 208 USPQ 871; and *In re Fine*, 837 F.2d 1071, 1074, 5 USPQ 2d 1596, 1598 (Fed. Cir. 1988) (citing *In re Lalu*, 747 F.2d 703, 705, 223 USPQ 1257, 1258 (Fed. Cir. 1988)). Further, it was determined in *In re Lamberti et al.*, 192 USPQ 278 (CCPA) that:

- (i) obviousness does not require absolute predictability;
- (ii) non-preferred embodiments of prior art must also be considered; and
- (iii) the question is not express teaching of references, but what they would suggest.

According to *In re Jacoby*, 135 USPQ 317 (CCPA 1962), the skilled artisan is presumed to know something more about the art than only what is disclosed in the applied references. In *In re Bode*, 193 USPQ 12 (CCPA 1977), every reference relies to some extent on knowledge of persons skilled in the art to complement that which is disclosed therein.

As such, it is respectfully submitted that Appellant appears to view the applied reference in a vacuum without considering the knowledge of average skill in the art.

In this particular case, one having ordinary skill in the art of network-based medical distribution system (such as Wong et al.) is presumed to know of general network components and techniques (i.e., data communication control system and remote service provider), as well.

Response to Arguments (C) and (E):

In response to the third and fifth arguments, the Examiner respectfully submits that it was the Wong et al. reference, in light of the knowledge of well-known concepts of the prior art that

was relied upon for the specific teaching of the IP address and the location of computer. Wong et al. in combination with what is well known in art, such as the definitions of a Domain Name System (DNS) and Domain Name System (DNS) server of the previous Office Action clearly indicate that domain name and IP addresses are included with receipt and transfer of information over the Internet.

As per the limitation of “data indicative of data indicative of a location of the mobile client”, it is respectfully submitted that this limitation, when given its broadest reasonable interpretation, does not absolutely require a client’s physical location or does it require any specific location in general. In the broadest sense of the term, an e-mail address would read on “data indicative of a location of the mobile client”, since it is data indicating the location source within the network that a mobile client operates. From that prospective, any laptop computer with e-mail capability (as Evans) would read on the claim.

In addition, prior art such as Evans as discussed in the prior Office Action, clearly discloses the use of laptop computer to access local area networks (LAN) and wide area networks (see: column 12, line 55 to column 13, lines 15 and Fig. 24). Thus, the knowledge and use of laptop or physically mobile clients over a network, has clearly existed in the art prior to Appellant’s claimed invention and the courts have held that even if a patient does not specifically disclose a particular elements said element being within the knowledge of a skilled artisan, the patent taken in combination with that knowledge, would put the artisan in possession of the claimed invention. *In re Graves*, 36 USPQ 2d 1697 (Fed. Cir. 1995).

Response to Argument (D):

In response to the fourth argument, the Examiner respectfully submits that Wong et al. teaches transmitting and processing of medical reports requested with medical image data from a network-attached (Intranet or Internet) to client workstations (see: column 3, lines 61 to column 4, lines 29 and column 3, lines 31-36). Additionally, the network-attached client workstations are configured with object-oriented graphical interface for receiving medical image requests for a user and in order for the medical image request to be initiated by a user, the request data, which is considered “client data” is transmitted from the client workstation (see: column 3, lines 60 to column 4, lines 15). Moreover, the Examiner never stated that in the four corners of the Wong reference that the medical image server was not used to receive, transmit and distributes client data and address data to the client. Furthermore, Wong’s medical image server functions as a data communication control system because it provides uniform and rapid distribution between client workstation (see: column 7, lines 10-14) and the operation of the Internet includes dialing up an Internet service provider (remote service provider) via modem to connect a network using the same communication protocols to pass information to and from each other. Likewise, the definitions of a Domain Name System (DNS), Domain Name System (DNS) server and remote access service are conventional technological standards that the skilled artisan using the Internet would recognize and the medical image server utilizes all these components to process requests in order to transmit medical images.

As per the combination of references, it must be recognized that any judgment to combine or the obviousness to combine reference(s) is in a sense necessarily a reconstruction based upon hindsight reasoning. But so long as it takes into account only knowledge which was within the level of ordinary skill at the time the claimed invention was made, and does not

include knowledge gleaned only from the Appellant's disclosure, such a reconstruction is proper.

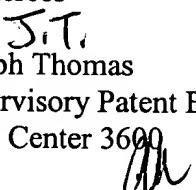
See *In re McLaughlin*, 443 F.2d 1392, 170 USPQ 209 (CCPA 1971).

For the above reasons, it is believed that the rejections should be sustained.

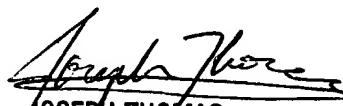
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